CITY OF BATTLE CREEK SITE PLAN REVIEW APPLICATION

GENERAL INFORMATION		
APPLICATION'S NAME:		TELEPHONE #:
ADDRESS:	CITY:	STATE: ZIP:
PROPERTY OWNER'S NAME:		TELEPHONE #:
LOCATION / ADDRESS OF PROJECT:		
EXISTING ZONING:		
EXISTING LAND USE:		
PROJECT INFORMATION		
TOTAL SITE ACREAGE:		ACRES TO BE DEVELOPED:
BUILDING COVERAGE:		IF RESIDENTIAL, # OF UNITS & NET DENSITY:
SQUARE FOOTAGE OF BUILDING:		# OF EMPLOYEES IN BUILDING:
VEHICULAR AREA (INCLUDING PARKING) :		# OF PARKING SPACES PROVIDED:
PROJECT DESCRIPTION		
FULL DESCRIPTION OF PROPOSED PROJECT:		
OWNER CERTIFICATION		
I certify that I am presently the legal owner of the above described property. Further I acknowledge the filing of this application and certify that all of the information is true and accurate. (Agent of owner must attach a		
letter of authorization from the legal owner).		
DATE: SIGN	ATURE:	
PRINT NAME:		

NOTE: All Applications/Payments are to be submitted to the Inspections Department at 10 N. Division St., Ste. 111, Battle Creek, MI 49017 Phone: (269-966-3382) Fax: (269-966-3654)

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